

## New Indigenous Dose Administration Aids (IDAA) Program Information for ACCHOs

### Key points

- A new DAA Program for Aboriginal and Torres Strait Islander people started 1 July 2021.
- Pharmacies manage program reporting and claim \$11.60 directly from the Community Pharmacy Agreement funds for each DAA. The program's funding is currently uncapped.
- Pharmacies cannot charge registered clients or their ACCHOs additional fees for the DAA.
- Any usual charges for script and over the counter medicines in DAAs will continue to apply.
- Patients receiving a DAA under this program are required to provide written or verbal consent. Pharmacists register patients in the program through the PPA Portal. They must communicate with the prescriber as part of the registration process.
- The IDAA Program Rules require pharmacies to keep in contact with their local Aboriginal and/or Torres Strait Islander organisations to ensure culturally responsive, safe and effective DAA
- The new program does not require DAA agreements between pharmacies and ACCHOs, as per the QUMAX program, and patients may choose which pharmacy get their DAAs from. However, the new Program is still consistent with ACCHOs having written DAA agreements with pharmacies if they want, which may align with ACCHOs' more general pharmacy services agreements.
- The Program applies to Aboriginal and Torres Strait Islander people attending ACCHOs as well as those who use mainstream GPs and clinics, as long as they meet the Program Rules (see below).



### Information for ACCHOs

#### 1. Patient information

- A prescriber or another healthcare provider can identify an eligible patient.
- A pharmacy cannot commence a DAA without discussing with the patient and patient's prescriber or other healthcare provider.
- A patient can choose their preferred DAA pharmacy, but will need to consider the logistical arrangements for prescriptions and can discuss this with their ACCHO as well as the pharmacy.
- Patients who have been receiving a DAA prior to 1 July may need to discuss what transferring to the new Program means for them with their ACCHO and/or pharmacy

#### 2. Patient eligibility

- The patient eligibility is based on self-identification as an Aboriginal and/or Torres Strait Islander person. It is for those living at home or in a community setting (i.e. not in a care facility);

**AND**

- A. who have difficulties managing their medications due to literacy or language issues, physical disability or cognitive difficulties

**OR**

- B. who are taking at least one prescription medicine and is experiencing difficulties with medication management.

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### 3. Patient consent

- To access the Program, informed consent is required either in writing or verbally. This consent is for the pharmacy to provide patient details to the program administrator for claiming purposes.
- This can be done by the pharmacist, prescriber or an ACCHO staff member using the Information and Consent Form available [here](#).
- The pharmacy is required to keep a copy of evidence of consent (e.g. the signed form).

### What is the pharmacy's role and responsibilities?

- Pharmacies need to register with the Pharmacy Program Administrator (PPA) Portal to participate in the Program and can claim \$11.60 per DAA per patient per week through the PPA Portal.
- To ensure pharmacies' cultural competence and the safe and appropriate supply of DAAs, the Program Rules state that pharmacies must regularly liaise with local Aboriginal and Torres Strait Islander organisations and communities (e.g. ACCHOs). This includes communicating regularly with the prescriber, or other healthcare providers involved in the patient's care. Pharmacies must also commit to undertaking regular and appropriate cultural competency training, where that need is identified by the local Aboriginal and Torres Strait Islander organisation/s.
- Consider making an agreement around prescription logistics, ongoing communication, consent process, new patients, DAA transport arrangements, deliveries and more.
- ACCHO and pharmacy DAA Agreements (optional) can be based on the guidelines referenced in the IDAA Program Rules; this includes the routine monitoring and <sup>[1]</sup> assessment of the Patient's use of the DAA. NACCHO has a sample DAA Agreement, please contact NACCHO.
- A DAA Agreement can set out agreed roles and responsibilities between your ACCHO and pharmacy/s around communication, consent workflow, DAA transport arrangements etc.

For more information including patient eligibility criteria, program rules and consent forms go to: [www.ppaonline.com.au/programs/medication-adherence-programs-2/indigenous-dose-administration-aids](http://www.ppaonline.com.au/programs/medication-adherence-programs-2/indigenous-dose-administration-aids) or click [here](#)

If you have any questions about the pharmacy's roles and responsibilities in this program or any other Program questions, please contact the NACCHO Medicines Team on [pharmacy@naccho.org.au](mailto:pharmacy@naccho.org.au).

[1]The Guidelines on Dose Administration Aids and Staged Supply of Dispensed Medicines by the Pharmacy Board of Australia (Pharmacy Board Guidelines); and "Standards and Guidelines for Pharmacists Providing a DAA Services" and "Guide to providing pharmacy services to Aboriginal and Torres Strait Islander people" by the Pharmaceutical Society of Australia (collectively PSA Standards).